

Office of Court Alternative Dispute Resolution
Maine Administrative Office of the Courts
147 New Meadows Road
West Bath, ME 04530

EXIT QUESTIONNAIRE

Whether or not your mediation resulted in an agreement, we want to know whether you found the mediation helpful and if you were treated fairly and professionally by the mediator.
Please return this form to the mediator or mail it in the self-addressed envelope provided.

Mediator's name: _____

Please place a check mark in the appropriate box:

1. The mediator explained the mediation process and procedures.
☐ Yes ☐ Somewhat ☐ No
2. The mediator treated me with respect.
☐ Yes ☐ Somewhat ☐ No
3. The mediator encouraged us to come up with our own solutions.
☐ Yes ☐ Somewhat ☐ No
4. In mediation, the environment felt safe enough to talk about issues that are important to me.
☐ Yes ☐ Somewhat ☐ No
5. Mediation was helpful and productive.
☐ Yes ☐ Somewhat ☐ No
6. Mediation was conducted in a fair and impartial manner.
☐ Yes ☐ Somewhat ☐ No
7. Mediation helped me to understand my choices better.
☐ Yes ☐ Somewhat ☐ No
8. I would use mediation again if needed in this case (or another case).
☐ Yes ☐ Somewhat ☐ No
9. Comments:

Name and contact information (optional): _____

If you wish to comment further on your mediation session or the mediator, please contact: Diane E. Kenty, Director at 207-442-0227 or by email diane.kenty@maine.gov